

(215) 569-5620

Fax

(215) 832-5620

Email:

crane@blankrome.com

October 30, 2012

## BY FEDEX AND ELECTRONIC MAIL

New York State Attorney General's Office: SECURITY BREACH NOTIFICATION Consumer Frauds & Protection Bureau 120 Broadway – 3<sup>rd</sup> Floor New York, NY 10271

To Whom it May Concern:

Blank Rome LLP has learned that its vendor, WeiserMazars, LLP ("WeiserMazars"), suffered a security breach incident that may have involved personal identifying information regarding personnel and former personnel of Blank Rome LLP. Per New York's Information Security Breach and Notification Act, we are writing to notify you that we will be sending notification to six New York residents (the "Consumers") regarding this security breach. On October 10, 2012, at some time prior to 7:30AM, a laptop belonging to WeiserMazars was stolen from the vehicle of a WeiserMazars employee in Philadelphia, Pennsylvania. This employee stored certain information regarding the Consumers which may have included the names and social security numbers of the Consumers. We have no reason to believe that any personal data was targeted for misuse, and we have no information that any personal data has been accessed by an unauthorized party.

It is our understanding that WeiserMazars is in the process of investigating the incident and has notified law enforcement authorities. WeiserMazars will be offering the Consumers a free subscription to a credit monitoring and identity theft protection service.

Enclosed please find a copy of each of the New York State Security Breach Reporting Form and the notice being sent to the Consumers.

Please contact William Roberts, General Counsel to Blank Rome LLP, at (215) 569-5632 if you have any questions.

Sincerely,

Molly Crane

MC/rgt

Enclosure

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## NEW YORK STATE SECURITY BREACH REPORTING FORM

Pursuant to the Information Security Breach and Notification Act (General Business Law §899-aa; State Technology Law §208)

Blank Rome LLP	owns or licenses the computerized data that was subject to the breach:	
Street Address: One Logan Square	130 North 18th Street	
City: Philadelphia	State: PA Zip Code: 19103	1
Submitted by: Molly Crane	Title: Attorney Dated: October 30, 2012	
Firm Name (if other than entity):		
Telephone: 215-569-5620	Email: Crane@blankrome.com	
	rmation was compromised: Employee	
Type of Organization (please se	ect one): [ ] Governmental Entity in New York State; [ ] Other Governmental	ental Entity
[○] Educational; [○]Health Care;	[○]Financial Services; [⑥]Other Commercial; [○] Not-for-profit	
N 1 (P		
Number of Persons Affected: Total (Including NYS residents):	9 NYS Residents: 8	
	cceeds 5,000, have the consumer reporting agencies been notified? [O] Yes;	ICINO
if the number of N13 residents e	ceeds 3,000, have the consumer reporting agencies been notined: [O] res,	[C] No.
Dates: Breach Occurred: 10/10/12	Breach Discovered: 10/10/12 Consumer Notification: 10/30/12	-
Description of Breach (please se		
The second of the second of	a (e.g., computer, laptop, external hard drive, thumb drive, CD, tape);	
Internal system breach; Ins	der wrongdoing; External system breach (e.g., hacking); Inadverten	t disclosur
Other (specify):		_
Information Associated Norman		· ·
•	other personal identifier in combination with (please select <u>all</u> that apply	7):
✓ Social Security Number		
	n-driver identification card number	
Financial account number or	redit or debit card number, in combination with the security code, access o	code,
password, or PIN for the accoun		
Manner of Notification to Affec	ed Persons - ATTACH A COPY OF THE TEMPLATE OF THE NOTICE	TO
AFFECTED NYS RESIDENTS:		
✓ Written; ✓ Electronic; ☐ T	lephone; Substitute notice.	
	12 months) breach notifications:	
	200	
Identify Theft Protection Service	rovider: Intersections Inc.	
	reports, monitoring, card theft protection, internet surveillance, theft insurance	

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Rev 4/15/2011 NOV 0 8 2012

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# PLEASE COMPLETE AND SUBMIT THIS FORM TO EACH OF THE THREE STATE AGENCIES LISTED BELOW:

#### Fax or E-mail this form to:

### New York State Attorney General's Office:

SECURITY BREACH NOTIFICATION

Consumer Frauds & Protection Bureau

120 Broadway - 3rd Floor

New York, NY 10271

Fax: 212-416-6003

E-mail: breach.security@ag.ny.gov

#### New York State Office of Cyber Security (OCS)

SECURITY BREACH NOTIFICATION

1220 Washington Avenue State Office Campus Building 7A, 4th Floor

Albany, NY 12242

Fax: 518-322-4976

E-mail: OCS.Info@dhses.ny.gov

## New York State Department of State Division of Consumer Protection (DOSCP):

SECURITY BREACH NOTIFICATION

5 Empire State Plaza, Suite 2101

Albany, NY 12223

Fax: 518-474-2474

E-mail: security breach notification@consumer.state.ny.us

(215) 569-5620

Fax:

(215) 832-5620

Email:

crane@blankrome.com

October 30, 2012

[Name] [Address 1] [Address 2] [Address 3]

Dear [Last Name],

We have recently learned of a data security breach involving a laptop belonging to one of our vendors, WeiserMazars, LLP, which was stolen from the vehicle of an employee of WeiserMazars on October 10, 2012, at some time prior to 7:30AM in Philadelphia, Pennsylvania. A file on the laptop may have included your name and social security number. We have no reason to believe that any personal data was targeted for misuse, and we have no information that any personal data has been accessed by an unauthorized party. Nevertheless, because the incident may have compromised this personally identifiable information, we are bringing this situation to your attention.

COMPLIMENTARY SERVICE OFFER: At the expense of WeiserMazars, we would like to offer you a free one year subscription to ITAC Sentinel<sup>®</sup> Plus, a credit monitoring and identity theft protection service. ITAC Sentinel Plus provides essential monitoring and protection of not only credit data, but also monitors Internet chat rooms and newsgroups and alerts you if your Social Security number, credit cards, and bank account numbers are found in unsecure online locations. This program is provided by Intersections Inc. (NASDAQ: INTX), a leading provider of consumer and corporate identity risk management services.

## ITAC Sentinel® Plus features include:

- . 3-Bureau Credit Report and Scores\*\*
- 3-Bureau Daily Monitoring with NOTIFY EXPRESS<sup>®</sup> Alerts
- · 3-Bureau Quarterly Credit Update
- ITAC Victim Assistance<sup>®</sup>
- Card Theft Protection
- Internet Surveillance
- Credit Education Specialists
- Up to \$20,000 identity theft insurance with \$0 deductible.\*

If you wish to take advantage of this monitoring service, you must enroll by February 8, 2013.

<u>ENROLLMENT PROCEDURE</u>: To activate this coverage please call the phone number or visit the Web site listed below and enter the redemption code. The redemption code is required for enrollment, and can only be used one time by the individual addressed.

Web Site:

www.itacsentinel.com/alert

Redemption Code:

[Code No.]

In order to enroll, you will need to provide the following personal information:

- Mailing Address
- Phone Number
- Social Security Number
- E-mail Address

The second secon

### [Name] [Page No.]

· Redemption Code

You may enroll by telephone if you do not have web access. If you wish to enroll by telephone, please contact Blank Rome LLP at (215) 569-5632 for further instructions.

This service is complimentary; no method of payment will be collected during enrollment and there is no need to cancel.

If you choose, you can also contact any of the three credit bureaus and request a credit freeze. In addition, it costs \$5.00 every time a temporarily lift is requested and \$5.00 to remove the freeze. To request a credit freeze you must write to all three credit bureaus and provide the following information:

- · Full name, address, social security number and date of birth
- Addresses where you have lived in the past five years
- · Proof of current address such as a current utility bill or phone bill
- · Photocopy of a government issued identification card
- If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint
  to a law enforcement agency concerning identity theft
- If you are not a victim include payment by check, money order or credit card.

Atlanta, GA 30374 Allen, TX 75013 P.O. Box 6790 1-800-685-1111 1-888-397-3742 Fullerton, CA 92834 1-800-680-7289			Fullerton, CA 92834
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Please note, if you plan on signing up for the complimentary service outlined above we recommend that you don't place a fraud alert or credit freeze until after enrollment because it can delay the receipt of your membership materials.

We recommend that you also take these additional precautions:

- · Review account statements often and report any suspicious activity to your financial institution immediately.
- Place password protection on all your accounts.
- If you suspect you are the victim of identity theft, contact the Federal Trade Commission at 1-877-ID-THEFT and contact local law enforcement.

We apologize for any inconvenience and urge you to enroll in the credit monitoring service today. If you have any further questions regarding this incident, please call William Roberts, General Counsel to Blank Rome LLP, at (215) 569-5632.

Sincerely,

Molly Crane

\*\*The ITAC Sentinel® Plus scores are provided specifically to consumers to help them understand their credit. Lenders use many different credit scoring systems, and the ITAC Sentinel Plus scores are not the same scores used to evaluate your credit.

\*Insurance underwritten by Travelers Casualty and Surety Company of America and its property casualty affiliates, Hartford, CT 06183. Coverage for all claims or losses depends on actual policy provisions. Availability of coverage can depend on underwriting qualifications and state regulations.

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One Logan Square 130 North 18th Street Philadelphia, PA 19103-6998

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## NEW YORK STATE SECURITY BREACH REPORTING FORM

Pursuant to the Information Security Breach and Notification Act (General Business Law §899-aa; State Technology Law §208)

Name and address of Entity that owns or licenses the computerized data that was subject to the breach:		
Blank Rome LLP		
Street Address: One Logan Square, 130 North 18th Street		
City: Philadelphia State: PA Zip Code: 19103		
Submitted by: Molly Crane Title: Attorney Dated: October 30, 2012		
Firm Name (if other than entity):		
Telephone: 215-569-5620 Email: Crane@blankrome.com		
Relationship to Entity whose information was compromised: Employee		
Type of Organization (please select one): [O] Covernmental Entity in New York State; [O] Other Governmental Entity;		
[O] Educational; [O]Health Care; [O]Financial Services; [@]Other Commercial; [O] Not-for-profit		
Number of Persons Affected:		
Total (Including NYS residents): 59 NYS Residents: 8		
If the number of NYS residents exceeds 5,000, have the consumer reporting agencies been notified? [O] Yes; [O] No.		
Dates: Breach Occurred: 10/10/12 Breach Discovered: 10/10/12 Consumer Notification: 10/30/12		
<u>Dates</u> : Breach Occurred: 10/10/12 Breach Discovered: 10/10/12 Consumer Notification: 10/30/12		
Description of Provide (also and or 11 the country)		
Description of Breach (please select all that apply):		
Loss or theft of device or media (e.g., computer, laptop, external hard drive, thumb drive, CD, tape);		
Insider wrongdoing; External system breach (e.g., hacking); Inadvertent disclosure;		
Other (specify):		
Information Assured: Name on other name of identification and is at a most (alone of the little of t		
<u>Information Acquired</u> : Name or other personal identifier in combination with (please select <u>all</u> that apply):  Social Security Number		
Driver's license number or non-driver identification card number		
Financial account number or credit or debit card number, in combination with the security code, access code, password, or PIN for the account		
password, of the for the account		
Manner of Notification to Affected Persons - ATTACH A COPY OF THE TEMPLATE OF THE NOTICE TO		
AFFECTED NYS RESIDENTS:		
Written; Electronic; Telephone; Substitute notice.		
List dates of any previous (within 12 months) breach notifications:		
Districted of any previous (whithis) breach notifications.		
Identify Theft Protection Service Offered: [@] Yes; [O] No.		
Duration: 1 year Provider: Intersections Inc.		
Brief Description of Service: credit reports, monitoring, card theft protection, internet surveillance, theft insurance		

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www.itacsentinel.com/alert

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- · Addresses where you have lived in the past five years
- · Proof of current address such as a current utility bill or phone bill
- Photocopy of a government issued identification card
- If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint
  to a law enforcement agency concerning identity theft
- If you are not a victim include payment by check, money order or credit card.

Equifax ® P.O. Box 740256 Atlanta, GA 30374	Experian® P.O. Box 8556 Allen, TX 75013	TransUnion® Fraud Victim Assistance Dept. P.O. Box 6790
1-800-685-1111	1-888-397-3742	Fullerton, CA 92834 1-800-680-7289

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Sincerely,

Molly Crane



\*Insurance underwritten by Travelers Casualty and Surety Company of America and its property casualty affiliates, Hartford, CT 06183. Coverage for all claims or losses depends on actual policy provisions. Availability of coverage can depend on underwriting qualifications and state regulations.